As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

<u>Device f</u>	or bridging a difference in	height between		
two floo	r surfaces	_		
the specification	of which (check only one item below):			
[ ]	is attached hereto.			
[]	was filed as United States application	•• <u>-</u>		
	Serial No	······································		
	on			
	and was amended			
	on	(if applicable).		
[x]	was filed as PCT international application			
	Number PCT/AT2005/00017			
	on 25 January 2005	,		
	and was amended under PCT Article 19			
	on	(if applicable).		

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Austria	A 318/2004	27 February 2004	[XYES [] NO
			[]YES []NO

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT internation; application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claim of this application is not disclose in that/those prior application(s) in the manner provided by the first paragraph of Title 35, Unite States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulation: §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

## PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS			STATUS (Check One)		
U.S. APPLICATION NUMBER	U.S. FII	U.S. FILING DATE		PENDING	ABANDONED
PCT A	PPLICATIONS DESIGNATING TH	E U.S.			
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration numbers):

KURT KELMAN, Registration No. 18,628 ALLISON C. COLLARD, Registration No. 22,532;

EDWARD R. FREEDMAN, Registration No. 26,048;

ELIZABETH COLLARD RICHTER, Reg. No. 35,103 WILLIAM C. COLLARD, Registration No. 38,411 FREDERICK J. DORCHAK, Registration No. 29,298

**Send Correspondence to:** COLLARD & ROE, P.C. Direct Telephone Calls to: 1077 Northern Boulevard (name and telephone number) (516) 365-9802 Roslyn, New York 11576 **FAMILY NAME FULL NAME** FIRST GIVEN NAME 2 SECOND GIVEN NAME OF INVENTOR Neuhofer Franz jun. CITY RESIDENCE & STATE OR FOREIGN COUNTRY 0 COUNTRY OF CITIZENSHIP CITIZENSHIP Zell am Moos Austria Austria **POST OFFICE POST OFFICE ADDRESS** CITY STATE & ZIP CODE/COUNTRY **ADDRESS** Haslau 56 Zell am Moos Austria/A 4893 **FAMILY NAME FULL NAME** FIRST GIVEN NAME 2 SECOND GIVEN NAME OF INVENTOR CITY RESIDENCE & STATE OR FOREIGN COUNTRY 0 COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY 2 STATE & ZIP CODE/COUNTRY ADDRESS **FULL NAME FAMILY NAME** 2 FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR CITY RESIDENCE & STATE OR FOREIGN COUNTRY 0 COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY 3 STATE & ZIP CODE/COUNTRY **ADDRESS** 

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE 25. 10. 200G	DATE	DATE